

**SPECIAL POPULATIONS CHECKLIST  
FOR EMERGENCY MANAGEMENT  
AND HUMAN SERVICE AGENCIES**

<b>SECTION I GENERAL</b>	<b>GENERAL ADVANCED PLANNING</b>	<b>Yes</b>	<b>No</b>
<b>Subsection 1</b>	<b>Training</b>		
<b>1.00</b>	Training on special populations for police, firefighters, paramedics, relief personnel, and human services staff		
1.01	Training included information on basic mobility issues and on visual and aural orientation techniques		
1.02	Training included information on how to interact with and assist persons with disabilities in a respectful and appropriate manner		
1.03	Regional staff, local govt., emergency managers/directors and human services directors are trained on disaster response issues related to persons with disabilities		
1.04	Notices of these training opportunities, any related conferences, and meetings, as well as press releases, have been sent to disability organizations		
<b>Subsection 2</b>	<b>Outreach to the Disability Community</b>		
<b>2.00</b>	Local emergency management teams, have identified disability issues and resource persons on disability issues		
2.01	DDES has suggested state and local contacts for these teams		
2.02	Emergency response entities and disability resources at the state and local levels have collaborated to present sessions on general response issues at disaster-related conferences and training on disability issues at disaster response trainings and conferences and/or to develop unique training opportunities on the subject as need or opportunity arise		
<b>Subsection 3</b>	<b>Accessibility of Shelters</b>		
3.00	In conjunction with Red Cross, local chapters and county/tribal agencies have reviewed existing potential shelter sites regarding compliance with ADA requirements		
3.01	A comprehensive data base including, but not limited to ADA suitable shelter sites has been developed		
3.02	Each community within the county/tribe has developed at least one site that is fully ADA accessible		
3.03	Shelters have made every effort to accommodate access to electricity for people with disabilities who may need such support for battery-powered wheelchairs, respirators, light computers, and other such electronic assistance devices		
3.04	Power sources are clearly marked and accessible		

3.05	Local communities and operational areas provide persons with disabilities with regularly updated information on the location of suitable shelters		
3.06	A list of resources including independent living centers and regional centers for persons with disabilities has been compiled and provided to American Red Cross, DHFS, the county/tribal DHHS or DHS, the county/tribal Emergency Management and the Federal Management Agency		
<b>Subsection 4</b>	<b>Communications—General</b>		
4.00	County/tribal Emergency Management and the county/tribal DHHS or DHS has provided disaster relief applications and/or process accessibility to people with hearing, visual, physical, and/or cognitive disabilities including:		
4.01	Alternative formats which may include communication books, print, audio cassette tapes, and information in a variety of demographically diverse languages		
4.02	The provision of American Sign Language (ASL) interpreters and Telesensory Devices for the Deaf (TDD) and staff who are in TDD operations		
4.03	Pertinent TDD phone numbers for federal and state relief and recovery organizations are widely publicized		
4.04	To support the County Emergency Management System's (CEM's) Operations Center, a representative or designee from the local DHS/DHHS, is prepared to respond to the County Operation Center (COC)		
4.05	Written materials for disaster response are available, upon request, in alternate formats (disk, Braille, large print, cassette tape)		
4.06	Entities which produce "on the shelf" materials have prepared some copies of all materials in alternate media, and have publicized such availability in each of the regularly printed documents		
4.07	County/tribal DHHS or DHS offer TDD and relay service access to persons with impairments and speech-to-speech relay service for persons with speech impairments and are prepared to make these services available during disaster		
4.07 (1)	These TDD and relay service numbers are publicized with all other response numbers for the call-in service		
4.07 (2)	There is a mechanism for the caller to contact a local human service agency for additional assistance in accessing service		
4.07 (3)	Community-based or local government entities have personnel who are trained in, and sensitive to, the needs of particular constituent groups, including persons with disabilities and other		

	special populations		
<b>Subsection 5</b>	<b>Coordination of Existing Resources</b>		
5.00	Local community resources that serve special populations have been identified and included in county/tribal emergency preparedness planning		
5.01	Communication systems between such special populations resources and local government have been implemented and practiced		
5.02	The local plan includes a specific section on resources to meet the unique disaster response needs of persons with disabilities in disaster response		
5.03	County/tribal DHHS or DHS have a specific section on resources to meet the unique disaster response needs of persons with disabilities in disaster response		
5.04	The County DHS/DHHS has a representative who serves on the County Emergency Planning Committee		
5.05	County/tribal DHHS or DHS has named a Disability Service Coordinator who has significant expertise in a wide range of disability issues to be part of their standardized emergency management system		
5.05 (1)	The Disability Service Coordinator has identified persons with disability issues and services who are part of advance preparation meetings, including those with hearing, speech, and language problems		
<b>Subsection 6</b>	<b>Review of Policies and Procedures</b>		
6.00	Each DHHS or DHS has reviewed and updated policies and procedures with significant involvement from the disability community		
6.01	Specific policy issues, particularly those related to potential discrimination issues under ADA, have been reviewed and revised		
6.02	Policies and procedures related to approval and need for medication and durable medical equipment repair should be reviewed and revised as appropriate to special populations needs in the local DHHS or DHS agency communities		
6.03	Language has been incorporated into policy and procedure revisions which prevent the potential block of replacement medications or durable medication as being duplicative refills		
6.04	Language has been incorporated or changed in policy and procedure revisions which allows for guide or trained companion animals to be allowed in shelters, if they allow for the appropriate independent care requirements of American Red		

	Cross or county/tribal shelter facilities		
6.05	Some provision of assistance to persons with disabilities to cots has been made in such shelters		
6.06	Emergency provisions of more highly trained personal care assistants have been made in such shelters		
6.07	Transportation policies and procedures at shelters have been evaluated and clarified		
6.07 (1)	There is clear language that transportation of persons with disabilities to shelters <i>will</i> be made by appropriate methods and these are outlined in the local EM and DHHS or DHS emergency response plans		
<b>SECTION II GENERAL</b>	<b>IMMEDIATE RESPONSE EFFORTS</b>		
<b>Subsection 1</b>	<b>Locating Special Populations Individuals</b>		
1.00	Through public and private collaboration, specific special populations have been identified by type and location in each local county/tribal area		
1.01	County/tribal DHHS or DHS, county/tribal EM teams have provided information to individuals of special populations regarding how to access the proper relief services		
1.02	County/tribal DHHS or DHS, with support from DHFS/DDES will provide liaison to EM o contact all individuals, including special populations, in affected areas to see if the clients need disaster related assistance		
1.03	Public and private providers have developed their own disaster response and business continuity plans including identification of and resources for providing services to special populations persons who receive their services when/if they are unable to do so for a period of time		
<b>Subsection 2</b>	<b>Communications Systems and Special Populations Needs</b>		
2.00	Communication systems recognize the need for communication to special populations to be simple, direct, realistic, and accurate		
2.01	Communications systems incorporate auditory and visual presentations and these communications are presented repeatedly to provide the greatest opportunities for special populations to access this information		
2.02	The county/tribal EM managers, that the Emergency Digital System (EDIS) is utilized when available and needed during a disaster		
2.03	County EM managers, through the operation of the state warning center, and its emergency alert system (EAS) designated radio and television stations has collaborated with		

	EAS stations to have them include the phone number for the Relay System for the Deaf and Speech Impaired in all warning messages and that the information provided by the EAS stations is available to the Relay System at the same time		
2.04	Collaboration of planning and services has occurred between county/tribal EM, county tribal DHHS or DHS, and the EAS and general public broadcasting system to identify which stations are designated for information dissemination, particularly information dissemination to special populations, in the event of a disaster or potential disaster		
2.05	Local cable companies have agreed to provide emergency information in captioned form, as well as in visual form, so that persons with hearing or visual impairments can access it		
2.06	EAS television stations have agreed to use captioning for critical emergency information and to repeat essential information orally as it is broadcast in visual display		
2.07	PIO's from county/tribal EM, and county tribal DHHS or DHS have received training on how to make information accessible to special populations as well as appropriate information and how to best communicate it to them		
2.07 (1)	PIOs utilize non-English speaking media in addition to English speaking media		
2.07 (2)	PIOs maintain responsibility for integrity of communications through translations		
2.07 (3)	PIOs activate procedures to utilize community special populations representatives at press conferences		
2.07 (4)	PIOs review with appropriate representatives from special populations written and spoken information for sensitivity to cultural, racial, religious, and ethnic differences, so as not to undermine compliance		
2.08	Bulletins disseminated by the emergency operations center includes information about services and accessibility provisions for special populations		
2.09	Push button life-line services have researched their ability to change over their service from regular phone service to cellular service in an emergency		
2.10	A "call-down" system of network communications, both to get information about disaster response to special populations and to get information about unique needs of special populations individuals to the general disaster response system has been planned and implemented		
2.11	Information regarding general disaster and disaster response efforts is communicated to the special populations service providers in the county/tribal area so they can, in turn, provide it		

	to individuals who are being immediately served by those providers		
<b>Subsection 3</b>	<b>Transportation of Special Populations</b>		
3.00	County/tribal DHHS or DHS together with local EM have identified transport agencies and companies—public, private, and handicapped accessible, in their area/region/community		
3.01	County/tribal DHHS or DHS together with local EM have identified potential challenges to transportation, for example, potential alternate road hazards and alternate routes for transport companies		
3.02	All transportation providers, including non-handicapped service companies, are trained in tie-downs and use of lifts, securing of oxygen units, how to speak with deaf or hard of hearing, how to provide reassurance to individuals with psychiatric disabilities, how to speak to someone with cognitive disabilities, and how to communicate with non-English speaking persons, strategies like repetition that will allow individuals time to comprehend instructions/information, and any other relevant information to working with special populations as identified by county/tribal DHHS or DHS		
3.03	County/tribal DHHS or DHS have identified means for accessing public or private health clinics for emergency dispensation of medication at shelters and the transportation of such medications to the shelters		
<b>Subsection 4</b>	<b>Distribution Site Availability</b>		
4.00	Have signage which includes international symbols, Braille, English plus two other most common languages of region in simple, direct, and accurate format		
4.01	Have procedure for activating translators and/or interpreters, as appropriate		
4.02	Have access and staffing for a secure area for infants and children		
4.03	Have alternate policies and procedures to provide program access to make services of distribution and assistance centers <i>quickly</i> accessible to special populations		
4.04	Where appropriate, have procedures for making more than general allotment of food and/or water available to special populations individuals who are sheltering in home so as to reduce the need to go to the distribution sites daily		
4.05	Where appropriate, have procedures for special populations to make “one stop” to receive multiple response services		

4.06	Have published available assistance sites and application forms over the Internet, as well as by phone, so special populations individuals can get information about how to secure needed services		
<b>Subsection 5</b>	<b>Medical Supplies and Durable Medical Equipment Services</b>		
5.00	Power companies have collaborated with county/tribal EM and DHHS or DHS to restore power to appropriate special populations individuals with electrical adaptive equipment needs sheltering at home or specific shelter sites		
5.01	Shelter sites have established a link through their local disaster council with medical equipment providers in the area which may loan, repair, or replace adaptive equipment (e.g., battery charger, wheelchair, etc.) when available as a result of a need created by the disaster		
5.02	In the event of a disaster or other catastrophe resulting in an emergency proclamation by the local, state or federal declaration authority, local DPH has assured that Medicare and other beneficiaries of health programs under its jurisdiction are allowed replacement of lost or damaged dentures, hearing aids, and other adaptive devices		
5.02 (1)	Local DPH has assured this will occur as soon as possible and without undue financial burden to beneficiaries or the providers of the item or device		
5.03	Pharmacies who have agreed to provide life-sustaining drugs on an emergency basis have been contacted and provided information regarding the specific medications needed and have a process for documenting its distribution		
<b>Subsection 6</b>	<b>Special Shelter Accommodations</b>		
6.00	Policies are in place regarding transfer of special populations, when necessary		
6.01	Procedures are in place for prompt transfer of persons with special needs to a viable, accessible facility		
6.02	Alternatives to inaccessible shelters are clearly communicated to the special populations individual		
6.03	Staff who are trained to work with non-English speaking and who are sensitive to diversity and culturally diverse groups has/have been notified, when needed, and are available to communicate the options available for the appropriate special populations clients		
6.04	Signage is presented in a simple, direct, and accurate manner and in international symbols, Braille, English plus two other most common languages		

6.05	Information is presented in audio and visual formats		
6.06	Appropriate translators and interpreters have been provided, as appropriate to need		
6.07	Shelter facilities have appropriate registries for special populations individuals housed on- and off-site		
6.08	Each site registry is tied into a larger location network directory		
6.09	Monitored points of entry to the facility insures facilities are accessible only to occupants wearing proper identification badges		
<b>SECTION III GENERAL</b>	<b>POST-DISASTER RECOVERY</b>		
<b>Subsection I</b>	<b>Housing Replacement and Restoration</b>		
1.00	Disability related resources, such as independent living centers and regional centers have collaborated with county/tribal EM, county/tribal DHHS or DHS, local housing authorities and other entities responsible for residential facilities for special populations to assist special populations individuals to determine if their home has been declared temporarily or permanently uninhabitable (“yellow-tagged” or “red-tagged”) and to assure the individual has an understanding of what that means		
1.01	City/county/tribal agencies have collaborated with community-based agencies through their local disaster council’s Disability Services Coordinator to expeditiously provide repair and hazard removal at home sites of special populations individuals		
1.02	The local housing authority has developed programs to assist special populations individuals in applying for replacement vouchers and certificates		
1.03	Policies for allowing guide dogs or pets at temporary sites has been established for relocation programs, as well		